118000156521

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COVER LETTER

	Registration S Division of Co			a N	
enniez	Kaexpert I				
SUBJEC	.T:		nited Liability Company		
The enclo	osed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please re	turn all correspo	ondence concerning this matter	to the following:		
		Shivon Patel, Esq.			
			Name of Person	<u> </u>	
		The Principal Law Firm, F	P.I.,		
			Firm/Company	_	
		4901 International Parkwa	ry, Suite 1021		
			Address		
		Sanford, Florida 32771			
		• • •	City/State and Zip Code	_ -	
		shivon@principallaw.net			
For furth	er information c	E-mail address: (concerning this matter, please c	to be used for future annual report no all;	otification)	
Shivon F	² atel		407 322-3003 at ()		
	Name c	of Person	Area Code Dayt	ime Telephone Number	
Enclosed	is a check for t	he following amount:			
■ \$25,0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy tadditional copy is enclosed)	
	Mailing Addres		Street Address:	ingtion	
Registration Section Division of Corporations			Registration Section Division of Corporations		
	P.O. Box 632	27	The Centre of	Tallahassee	
	Tallahassee.	FL 32314	2415 N. Mont	roe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kaexpert LLC				
(<u>Name of the Limited Liability</u> (A Florida l	Company as it now appears on our records.) imited Liability Company)			
The Articles of Organization for this Limited Liability Co Florida document number 1.18000156521	mpany were filed on June 26, 2018 and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ed liability company here:			
he new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	101 North Country Club Road, Suite 108			
Principal office address MUST BE A STREET ADDRE	Lake Mary, Florida 32746			
Enter new mailing address, if applicable:	101 North Country Club Road, Suite 108			
Mailing address MAY BE A POST OFFICE BOX)	Lake Mary, Florida 32746			
agent and/or the new registered office address here:	office address on our records, enter the name of the new regist			
	- In I - G - 1001			
New Registered Office Address: 4901 Int	Enter Florida street address			
Sanford	Enter Florida street address Florida 32771 City Zup Code			
	City Zip Code -5			
New Registered Agent's Signature, if changing Registered	Agent:			

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with ant accept the obligations of my position as registered agent as provided for in Chapter 605. F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Keennary Pungyera	5691 Bassett Pl	🗆 Add
		Sanford, Florida 32771	=Remove
			□Change
AMBR	Suresh babu Ramachandran	101 North Country Club Road, Suite 108	≘ Add
		Lake Mary, Florida 32746	□Remove
			□Change
AMBR	Alpesh Makwana	101 North Country Club Road, Suite 108	
		Lake Mary, Florida 32746	□Remove
			□Add
			□Remove
			□Change
			□Add
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			□Change
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<u>te:</u> li`tl	date, if other than e date is listed, the date ne date inserted in the s effective date on the	nis block does n	ot meet the appl	icable statutor	ng or more than 9 y filing require	(option: 0 days after fili ments, this da	al) ng.) Pursuant to 60 ate will not be li	05.0207 sted as
eord sp s filed.	ecities a delayed eff	fective date, but	not an effective	time, at 12:01	a.m. on the ea	rlier of; (h)	The 90th day aft	ter the
ed	October	25,	2021	<u> </u>				
		/Signature o	MANA	thorized represe	ntative of a mem	her		
	Almah Makasa	ų .	· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · ·		
	Alpesh Makwana		أحمد المهمدا	nted name of sig	IDAN .			

Filing Fee: \$25.00